PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005				Complete ii Known				
00					Application Number 10/760,462-Co			nf. #1410	
OTPE					Filing Date		January 21, 2004		
) (Q3					First Named Inventor		Wieslaw J. SZAJNOWSKI		
Anne	FOFF	2005		{	Examiner Name		I. A. Alsomiri		
MAY 2 4 2006	Applicant claims small entity				Art Unit		3662		_
h at	TOTAL AMOUNT OF PAYMEN	IT (\$)	450.00		Attorney Docket I	No.	1906-0130P		
TRADEMARK!	METHOD OF PAYMENT (check all that apply)								
- ,	X Check Credit Card Money Order None Other (please identify):								
	Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
:	Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17								
	FEE CALCULATION								
	1. BASIC FILING, SEARCH, AN	D EXAMIN	ATION FEES	;	-				
		FILING F		SEA	RCH FEES	EXAMI	NATION FEES		
	Application Type Fe		all Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)
	Utility	300	150	500	250	200	100		
	Design	200	100	100	50	130	65		
	Plant	200	100	300	150	160	80		
	Reissue	300	150	500	250	600	300		
	Provisional	200	100	0	0	0	0		
·	2. EXCESS CLAIM FEES								mall Entity
	Fee Description	\ - ! · - · \						Fee (\$)	Fee (\$)
	Each claim over 20 (including R Each independent claim over 3 (•	(aiaayaa)					50	25
	Multiple dependent claims	menuamg K	cissuesj					200 360	100 180
	Total Claims Extra Claim	ns Fee (r e 1	Foo P	aid (\$)		Multiple Deposeds		100
	7 - 20 =	ree P	aid (#)	_	Multiple Dependent Claim Fee (\$) Fee Paid (
		_ ~	=			_	<u>-</u>		
	Indep. Claims Extra Claim	ns Fee ((\$)	Fee P	aid (\$)				
	1 -3=	_ ×							
	3. APPLICATION SIZE FEE If the specification and drawing listings under 37 CFR 1.52(sheets or fraction thereof. S	e)), the appl	lication size	fee due	is \$250 (\$125 fc				
	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x =								
	4. OTHER FEE(S)		7		•	,		Fees Pa	aid (\$)
	Non-English Specification, \$130 fee (no small entity discount)								
	Other (e.g., late filing surcharge): 282 Extension for response within second month 450.00								

Registration No. (Attorney/Agent)

29,680

Telephone

Date

(703) 205-8000

May 24, 2006

Michael K. Mutter

SUBMITTED BY

Name (Print/Type)

Signature

Approved for use through 7/31/2006. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME	Docket Number (Optional)						
FY 2005 (Fees pursuant to the Consolidated Appropr	iations Act, 2005 (H.R. 4818).)	1906-	0130P				
Application Number 10/760	,462-Conf. #1410	Filed Jan	uary 21, 2004				
For SIGNAL DETECTION							
Art Unit 3662		Examiner	I. A. Alsomiri				
This is a request under the provisions of 3 identified application.							
The requested extension and fee are as for	ollows (check time period desi	red and enter the appi	opriate tee below):				
One month (37 CFR 1.17(a)(<u>Fee</u> 1)) \$120	Small Entity Fee \$60	\$				
X Two months (37 CFR 1.17(a)	(2)) \$450	\$225	\$ 450.00				
Three months (37 CFR 1.17(a	a)(3)) \$1020	\$510	\$				
Four months (37 CFR 1.17(a)	(4)) \$1590	\$795	\$				
Five months (37 CFR 1.17(a)	(5)) \$2160	\$1080	\$				
Applicant claims small entity status. See 37 CFR 1.27. X A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number							
x attorney of under 37 CFR 1.34.							
Registration number	er if acting under 37 CFR 1.34	29,680	·				
	May 24, 2006						
l Signature		Da	ate				
Michael K. Mu Typed or printed	(703) 205-8000 Telephone Number						
NOTE: Signatures of all the inventors or assignees of than one signature is required, see below.							

05/25/2006 SZEWDIE1 00000030 10760462

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